



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#6/10
F.BELL
SEP 27 2001
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Applicants: Mike Chang, King Owyang, Yueh-Se Ho, Y. Mohammed Kasem,
Lixiong Luo, Wei-Bing Chu

Assignee: Siliconix Incorporated

Title: Semiconductor Die Package Including Cup-Shaped Leadframe

Serial No.: 09/468,249 Filing Date: December 10, 1999

Examiner: S. Rao Group Art Unit: 2814

Docket No.: M-7970 US

Newport Beach, California
September 10, 2001

BOX NON-FEE AMENDMENT
COMMISSIONER FOR PATENTS
Washington, D.C. 20231

RESPONSE TO NON-FINAL OFFICE ACTION

Dear Sir:

In response to the Office Action dated June 20, 2001, please amend this application as follows.

IN THE CLAIMS

Please amend Claim 1 as follows:

1. (Amended) A semiconductor package comprising:
- a semiconductor die having a first and second sides, a first electrical terminal being located on the first side, at least a second electrical terminal being located on the second side; and
- a leadframe in electrical contact with the first terminal, the leadframe being formed in the shape of a cup, the die being located in the cup, at least one lead of the

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Docket No.: M-7970 US



September 20, 2001

Box Non-Fee Amendment
Commissioner For Patents
Washington, D.C. 20231

Re: Applicant(s): Chang, Mike; Chu, Wei-Bing; Ho, Yueh-Se; Kasem, Y. Mohammed;
Luo, Lixiong; Owyang, King
Assignee: Siliconix incorporated
Title: Semiconductor Die Package Including Cup-Shaped Leadframe
Serial No.: 09/468,249
Examiner: S. Rao
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Group Art Unit: 2814

RECEIVED
SEP 25 2001
TECHNOLOGY CENTER 2800

Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Return Receipt Postcard;
- (2) This Transmittal Letter (in duplicate);
- (3) Response to Non-Final Office Action;

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No additional fee is required.

The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining <u>After Amendment</u>		Highest No. Previously <u>Paid For</u>		Present <u>Extra</u>		<u>Rate</u>		Additional <u>Fee</u>
Total Claims	8	Minus	20	=	0	x	\$18.00	\$	0.00
Independent Claims	1	Minus	3	=	0	x	\$80.00	\$	0.00
<input type="checkbox"/>	Fee of _____ for the first filing of one or more multiple dependent claims per application							\$	
<input type="checkbox"/>	Fee for Request for Extension of Time							\$	
<u>Total additional fee for this Amendment:</u>								\$	<u>0.00</u>
<input type="checkbox"/>	Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.								
<input type="checkbox"/>	Please charge our Deposit Account No. 19-2386 in the amount of							\$	<u>0.00</u>
<input checked="" type="checkbox"/>	Also, charge any additional fees required and credit any overpayment to our Deposit Account No. 19-2386.								
Total:								\$	0.00

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Respectfully submitted,

David E. Steuber
David E. Steuber
Attorney for Applicant(s)
Reg. No. 25,557